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US
ORPlease type a plus sign (+) inside this box → +Approved for use through 09/30/2000. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

Attorney Docket No. 991057

First Inventor or Application Identifier Horowitz et al.

Title IDENTICAL INSURANCE ELIGIBILITY DETERMINATION AND
UTILIZATION RECORDATION SYSTEM

Express Mail Label No. EL 217334992US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. * Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. Specification [Total Pages 17]
 - Descriptive title of the Invention
 - Cross References to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to Microfiche Appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
3. Drawing(s) (35 U.S.C. 113) [Total Sheets 2]
4. Oath or Declaration [Total Pages 3]

 - a. Newly executed (original or copy)
 - b. Copy from a prior application (37 C.F.R. § 1.63(d))
(for continuation/divisional with Box 17 completed)
[Note Box 5 below]
 - i. DELETION OF INVENTOR(S)
Signed statement attached deleting
inventor(s) named in the prior application,
see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).

5. Incorporation By Reference (useable if Box 4b is checked)
The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered to be part of the disclosure of the accompanying application and is hereby incorporated by reference therein.

Assistant Commissioner for Patents
ADDRESS TO: Box Patent Application
Washington, DC 20231

6. Microfiche Computer Program (Appendix)
7. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)
 - a. Computer Readable Copy
 - b. Paper Copy (identical to computer copy)
 - c. Statement verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

8. Assignment Papers (cover sheet & document(s))
9. 37 C.F.R. § 3.73(b) Statement
(when there is an assignee) Power of Attorney
10. English Translation Document (if applicable)
11. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Citations
12. Preliminary Amendment
13. Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
 - * Small Entity Statement(s) Statement filed in prior application, (PTO/SB/09-12) Status still proper and desired
14. Statement filed in prior application, (PTO/SB/09-12) Status still proper and desired
15. Certified Copy of Priority Document(s)
(if foreign priority is claimed)
16. Other:

* NOTE FOR ITEMS 1 & 14: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).

17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:

 Continuation Divisional Continuation-in-part (CIP) of prior application No: _____ / _____

Prior application information: Examiner _____ Group / Art Unit: _____

18. CORRESPONDENCE ADDRESS

Customer Number or Bar Code Label: _____ or Correspondence address below
(Insert Customer No. or Attach bar code label here)

| | | | | | |
|---------|--|-----------|--------------|----------|------------------|
| Name | Max Shaftal FACTOR AND SHAFTAL, LLC | | | | |
| Address | 100 W. Monroe St., Suite 300 | | | | |
| City | Chicago | State | IL | Zip Code | 60603 |
| Country | US | Telephone | 312-578-0400 | | Fax 312-578-8220 |

| | | | |
|-------------------|-------------|-----------------------------------|-------|
| Name (Print/Type) | Max Shaftal | Registration No. (Attorney/Agent) | 31422 |
| Signature | Max Shaftal | | |
| | Date | 4/18/99 | |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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FEE TRANSMITTALPatent fees are subject to annual revision on October 1.
These are the fees effective October 1, 1997.Small Entity payments must be supported by a small entity statement,
otherwise large entity fees must be paid. See Forms PTO/SB/09-12.
See 37 C.F.R. §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT (\$ 447.00)

Complete if Known

| | |
|----------------------|-----------------|
| Application Number | |
| Filing Date | April 8, 1999 |
| First Named Inventor | Horowitz et al. |
| Examiner Name | |
| Group / Art Unit | |
| Attorney Docket No. | 991057 |

METHOD OF PAYMENT (check one)1. The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 50-0545
Deposit Account Name FACTOR AND SHAFTAL, LLC

Charge Any Additional Fee Required Under 37 C.F.R. §§ 1.16 and 1.17 Charge the Issue Fee Set in 37 C.F.R. § 1.18 at the Mailing of the Notice of Allowance

2. Payment Enclosed:

Check Money Order Other

FEE CALCULATION**1. BASIC FILING FEE**

| Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description | Fee Paid | | |
|----------------------------|----------------------------|-----------------|----------|------------------------|-----|
| 101 | 790 | 201 | 395 | Utility filing fee | 380 |
| 106 | 330 | 206 | 165 | Design filing fee | |
| 107 | 540 | 207 | 270 | Plant filing fee | |
| 108 | 790 | 208 | 395 | Reissue filing fee | |
| 114 | 150 | 214 | 75 | Provisional filing fee | |
| SUBTOTAL (1) (\$) | | | | 380 | |

2. EXTRA CLAIM FEES

| Total Claims | Extra Claims | Fee from below | Fee Paid |
|--------------------|--------------|----------------|----------|
| 23 | -20** = 3 | x 9 | 27 |
| Independent Claims | 3 | - 3** = | |
| Multiple Dependent | | | |

**or number previously paid, if greater; For Reissues, see below

| Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description | | |
|----------------------------|----------------------------|-----------------|-----|--|
| 103 | 22 | 203 | 11 | Claims in excess of 20 |
| 102 | 82 | 202 | 41 | Independent claims in excess of 3 |
| 104 | 270 | 204 | 135 | Multiple dependent claim, if not paid |
| 109 | 82 | 209 | 41 | ** Reissue independent claims over original patent |
| 110 | 22 | 210 | 11 | ** Reissue claims in excess of 20 and over original patent |
| SUBTOTAL (2) (\$) | | | | 27 |

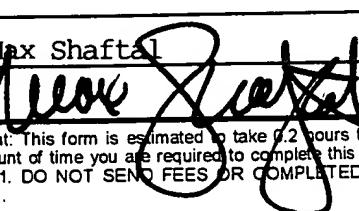
3. ADDITIONAL FEES

| Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description | Fee Paid | | |
|----------------------------|----------------------------|-----------------|----------|--|--|
| 105 | 130 | 205 | 65 | Surcharge - late filing fee or oath | |
| 127 | 50 | 227 | 25 | Surcharge - late provisional filing fee or cover sheet | |
| 139 | 130 | 139 | 130 | Non-English specification | |
| 147 | 2,520 | 147 | 2,520 | For filing a request for reexamination | |
| 112 | 920* | 112 | 920* | Requesting publication of SIR prior to Examiner action | |
| 113 | 1,840* | 113 | 1,840* | Requesting publication of SIR after Examiner action | |
| 115 | 110 | 215 | 55 | Extension for reply within first month | |
| 116 | 400 | 216 | 200 | Extension for reply within second month | |
| 117 | 950 | 217 | 475 | Extension for reply within third month | |
| 118 | 1,510 | 218 | 755 | Extension for reply within fourth month | |
| 128 | 2,060 | 228 | 1,030 | Extension for reply within fifth month | |
| 119 | 310 | 219 | 155 | Notice of Appeal | |
| 120 | 310 | 220 | 155 | Filing a brief in support of an appeal | |
| 121 | 270 | 221 | 135 | Request for oral hearing | |
| 138 | 1,510 | 138 | 1,510 | Petition to institute a public use proceeding | |
| 140 | 110 | 240 | 55 | Petition to revive - unavoidable | |
| 141 | 1,320 | 241 | 660 | Petition to revive - unintentional | |
| 142 | 1,320 | 242 | 660 | Utility issue fee (or reissue) | |
| 143 | 450 | 243 | 225 | Design issue fee | |
| 144 | 670 | 244 | 335 | Plant issue fee | |
| 122 | 130 | 122 | 130 | Petitions to the Commissioner | |
| 123 | 50 | 123 | 50 | Petitions related to provisional applications | |
| 126 | 240 | 126 | 240 | Submission of Information Disclosure Stmt | |
| 581 | 40 | 581 | 40 | Recording each patent assignment per property (times number of properties) | |
| 146 | 790 | 246 | 395 | Filing a submission after final rejection (37 CFR 1.129(a)) | |
| 149 | 790 | 249 | 395 | For each additional invention to be examined (37 CFR 1.129(b)) | |
| Other fee (specify) | | | | | |
| Other fee (specify) | | | | | |
| SUBTOTAL (3) (\$) | | | | 40 | |

Reduced by Basic Filing Fee Paid

SUBMITTED BY

Typed or Printed Name Max Shaftal

Signature 

Complete (if applicable)

Reg. Number 31422

Deposit Account User ID 50-0545

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In Re Apln. of:

Horowitz et al.

Ser. No.:

to be assigned

Filed on:

April 8, 1999

For:

DENTAL INSURANCE ELIGIBILITY
DETERMINATION AND UTILIZATION
RECORDATION SYSTEM

Docket No.:

991057

1C518 U. S. PTO
09/28/97 57
04/08/99



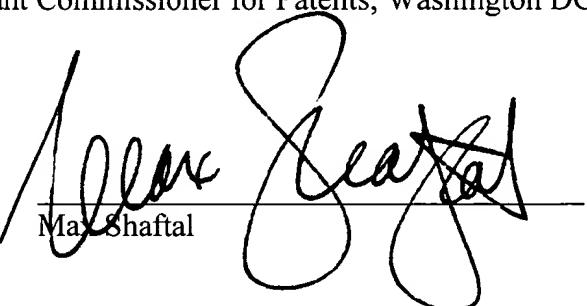
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Date of Deposit - April 8, 1999

I hereby certify that this correspondence is being deposited with the United States Postal Service, "Express Mail Post Office to Addressee" service under 37 C.F.R. 1.10 in an envelope addressed to Box PATENT APPLICATION, Assistant Commissioner for Patents, Washington DC 20231, on April 8, 1999.

Dated: April 8, 1999



Max Shaftal